

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	h	43	5/31/01
O.I.P.E. CLASSIFIER		1018	6/29/01
FORMALITY REVIEW	FR		
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

☐ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted
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☐ I
☐ A
☐ O
☐ Non-elected
☐ Interference
☐ Appeal
☐ Objected

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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